## **Mountaineer Park**

20 CLERK OF SCALES 20 CLERK OF SCALES

3 O CLOCKER / ASST

\$20.00

\$20.00

\$20.00





Phone: **304.387.8525** 

Fax: **304.387.2226** 

2015

07/29/2015 11:37:45



Section 1				Section	n 2					
Soc Sec # or Tax ID #				Address						
Name				City						
Date of Birt	h / /			State			Zip			
Trainer / Employer				Phone #			Cell #			
				Partners						
Stable Nam										
Identificati		Λαο	Color: Hair	Color: Evo	L Lois	aht	ft in	Woight		
		Age	Color. Hall	Color. Lyes	5 1 lei	JIIL	. 11 111.	vveignt		
Questions a-h must be answered "yes" or "no"       Yes       No         a. Has you or your spouse's racing license ever been denied, suspended for more than 7 days, or revoked?       a										
NOTE: Trainers and Businesses State & Year Last Finge			ingerprinted:	Return to: W	/RC Lic	ense Clerk	c - Mountair	neer Park		
need copy of				3.1	Mail to: P. O. Box 358 Chester WV 26034					
Workers' Compensation State: Year:				ear:	Overnight to: State Route 2 Chester WV 26034					
Section 3 Please mark th	<b>3</b> ne license(s) you are reques	sting today	Si	gnature of Applican	t			Date		
[] 55 A	ACCOUNTING	\$20.00	[_] 30	CLOCKER / ASST	\$20.00	[] 1:		KEEPING	\$20.00	
[] 55 A [] 2 A	ACCOUNTING ADMINISTRATIVE	\$20.00 \$20.00	[] 42 A [] 42 A	DEALER/GAMING DEALER/GAMING	\$20.00 \$20.00			KEEPING RESOURCES	\$20.00 \$20.00	
[_] 2A	ADMINISTRATIVE	\$20.00		EMT-B	\$20.00			RESOURCES	\$20.00	
3 A	ADMISNSS/PROGS	\$20.00	4 A	EMT-B	\$20.00			IGATOR	\$20.00	
[] 3A	ADMISNSS/PROGS	\$20.00	[] 16 B	EX. RIDER	\$20.00	[_]	5C INVEST	IGATOR	\$20.00	
[] 44 A	AMBULANCE	\$20.00	[ <u>    ]</u> 16 B	EX. RIDER	\$20.00	[] 1	7B JOCKE	1	\$30.00	
[] 44 A	AMBULANCE	\$20.00	[] 37 A	EXEC OFFICES	\$20.00		7B JOCKE		\$30.00	
[] 18 B	APP. JOCKEY	\$20.00	[] 37 A	EXEC OFFICES	\$20.00			AGENT	\$20.00	
[] 18 B	APP. JOCKEY	\$20.00	[] 99 A	FINGERPRINTS	\$72.00			/ AGENT	\$20.00	
[_] 20 O	ASST STARTER	\$20.00	[] 99 A	FINGERPRINTS	\$72.00			/ RM CUST	\$20.00	
[_] 20 O	ASST STARTER	\$20.00	[] 98 A	FITNESS CENTER	\$20.00			/ RM CUST	\$20.00	
[_] 36 B	ASST TRAINER	\$30.00	[] 98 A	FITNESS CENTER	\$20.00			/ VALET	\$20.00	
[_] 36 B	ASST TRAINER	\$30.00	[_] 7A	FOOD & BEVERAGE				/ VALET	\$20.00	
[_] 1B	AUTH AGENT	\$20.00	[_] 7A	FOOD & BEVERAGE			4 A LEGAL		\$20.00	
[_] 1B	AUTH AGENT	\$20.00	[_] 9A	GM / ASST GM	\$20.00		4 A LEGAL	NANCE	\$20.00	
[_] 3B	BLACKSMITH / PL	\$20.00	[_] 9A	GM / ASST GM	\$20.00		4 A MAINTE		\$20.00	
[_] 3B	BLACKSMITH / PL	\$20.00	[_] 11 A	GOLF COURSE	\$20.00		4A MAINTE		\$20.00	
[] 25 A	CAMERA OP	\$20.00	[_] 11 A	GOLF COURSE	\$20.00		3 A MARKE		\$20.00	
[] 25 A [] 5 B	CAMERA OP CHAPLAIN	\$20.00 \$20.00	[] 15 B [] 15 B	GROOM GROOM	\$20.00 \$20.00		3 A MARKE 7 O MINOR	OFFICIAL	\$20.00 \$20.00	
[] 5B	CHAPLAIN	\$20.00	[] 13 B [] 26 A	GROUP SALES	\$20.00			OFFICIAL	\$20.00	

**GROUP SALES** 

HOTEL

\$20.00

\$20.00

\$20.00

16 A

16 A

MIS

MIS

[\_\_] 15 A MISCELLANEOUS

\$20.00

\$20.00

\$20.00

26 A

[\_\_] 17 A HOTEL

[\_\_] 17 A

## **Mountaineer Park**

License Application

28 B

18 A

18 A

19 A

19 A

15 O

15 O

33 B

33 B

27 A

27 A

OWNER/TRAINER

PHOTOGRAPHER

PHOTOGRAPHER

PLACING JUDGE

PLACING JUDGE

PONY RIDER

PONY RIDER

**PURCHASING** 

**PURCHASING** 

**PARKING** 

**PARKING** 

\$60.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00



Phone: 304.387.8525

Fax: **304.387.2226** 

2015

07/29/2015 11:37:45



Section 1				Section 2	2						
Soc Sec # or Tax ID #			Address								
Name				City							
Date of Birth	/ /			State		Zip					
Trainer /				Phone #		Cell #					
Employer				Partners	Partners						
Stable Name Identification:											
identification.		Age	Color: Hair	Color: Eyes _	Height	ft in.	Weight				
Questions a-h must be answered "yes" or "no"  a. Has you or your spouse's racing license ever been denied, suspended for more than 7 days, or revoked?  b. Has any other type of license or permit of you or your spouse ever been suspended, denied, or revoked?  c. Have you ever been expelled, discharged, or ejected from any race track or fined more than \$100.00?  d. Have you or your spouse ever been convicted of, or forfeited bail on, any felony or misdemeanor criminal offense? (Including DUI or DWI)  e. Are there any criminal charges currently pending anywhere against you or your spouse?  f. Are you or your spouse currently on parole or probation?  g. Are there any outstanding civil judgements against you or your spouse?  f. Are you a United States citizen?  If NO, Citizenship Visa #  For a through h above, for each "yes" above, you must provide full details on back of this application and affirm that every statement contained therein is true and correctly set forth, and I do hereby assert and agree, as a condition precedent to the receiving of said license, that the same may, at any time, be summarily revoked, canceled or suspended, or withdrawn.  I authorize the West Virginia Racing Commission or it's designated agent to investigate my background to determine my eligibility for a license as per the West Virginia Rules of Racing.  I authorize any company, organization, educational or health care institution or law enforcement agency to release any personal records, medical records, educational records, credit history records, criminal history records, or other such documentation to the West Virginia Racing Commission or it's authorized agent.											
ne	ners and Busines		State & Year Last Fingerpri	intea:	Mail to: P. O. Roy 358 Chester WV 26034						
Worker	s' Compensation		State: Year:	Overnight to: State Route 2 Chester WV 26034							
Section 3	ense(s) you are reques	ting today	Signature	of Applicant			<i></i>	te			
	SCELLANEOUS	\$20.00	_	OFFICAL	\$30.00 [_] 22	A TOTE		\$20	.00		
[] 43 A MU	ITUELS ITUELS	\$20.00 \$20.00	[_] 16 O RACING	OFFICAL	\$30.00 [] 23	BA TRACK		\$20 \$20	.00		
[j 12 O OU	ITRIDER	\$20.00	[] 29 A RECEIV	ING	\$20.00 [_] 35	B TRAINE	₹	\$30	.00		
	ITRIDER VNER	\$20.00 \$30.00				B TRAINE		\$30 \$20			
	VNER VNER	\$30.00				A UNIFOR		\$20 \$20			
	VNER/ASSIT TRA	\$60.00		TY		A VENDO		\$40			
	VNER/ASSIT TRA VNER/TRAINER	\$60.00 \$60.00				IA VENDOF DA VENDOF		\$40 \$20			

STABLE NAME

STABLE NAME

STALL SUPER

STALL SUPER

SURVEILLANCE

SURVEILLANCE

TEMP. SERVICE

TEMP. SERVICE

STEWARD

STEWARD

TOTE

32 B

32 B

18 O

18 O

19 O

19 O

32 A

32 A

46 A

46 A

22 A

\$40.00

\$40.00

\$20.00

\$20.00

\$30.00

\$30.00

\$20.00

\$20.00

\$20.00

\$20.00

\$20.00

VENDOR HELPER

VETERINARIAN

VETERINARIAN

VIDEO LOTTERY

VIDEO LOTTERY

AFTER you complete Section 3, please

give completed form to the clerk.

**VET ASST** 

**VET ASST** 

20 A

40 B

40 B

39 B

39 B

41 A

41 A

\$20.00

\$20.00

\$20.00

\$30.00

\$30.00

\$20.00

\$20.00